☐ Check if this is an
amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims   **12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B*)* and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1:	**List All Creditors with PRIORITY Unsecured Claims**

1. **Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).
   ☐ No. Go to Part 2.
   ☒ Yes. Go to line 2.

2. **List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	**Priority amount**

2.1 | **Priority creditor's name and mailing address**
Andrew J. Chapin
26 Cragmont Avenue
San Francisco, CA 94116

As of the petition filing date, the claim is: $ 15,308.00 $10,000
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
09/01/20 - 09/30/20

Basis for the claim:
Regular compensation

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

2.2 | **Priority creditor's name and mailing address**
Matthew Goldstein
1630 Commercial Street
Weymouth, MA 02189

As of the petition filing date, the claim is: $ 6,725.00 $ 6,725.00
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
09/01/20 - 09/30/20

Basis for the claim:
Regular compensation

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

2.3 | **Priority creditor's name and mailing address**
Morgan Reilly
7790 Westside Drive, #310
San Diego, CA 92108

As of the petition filing date, the claim is: $ 7,975.00 $ 7,975.00
Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred
09/01/20 - 09/30/20

Basis for the claim:
Regular compensation

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

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Part 1.	Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.	Total claim	Priority amount

2.__ **Priority creditor's name and mailing address** $_____ $_____

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred

_____

Basis for the claim:

_____

Last 4 digits of account number   ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

2.__ **Priority creditor's name and mailing address** $_____ $_____

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred

_____

Basis for the claim:

_____

Last 4 digits of account number   ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

2.__ **Priority creditor's name and mailing address** $_____ $_____

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred

_____

Basis for the claim:

_____

Last 4 digits of account number   ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

2.__ **Priority creditor's name and mailing address** $_____ $_____

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Date or dates debt was incurred

_____

Basis for the claim:

_____

Last 4 digits of account number   ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. **List in alphabetical order all of the creditors with nonpriority unsecured claims.** If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim

3.1 **Nonpriority creditor's name and mailing address**

Sean Fleming
16817 Eagle Bluff Court
Chesterfield, MO 63005

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Basis for the claim: Investor loan

Date or dates debt was incurred 4/20/2020

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

$ 150,000.00

3.2 **Nonpriority creditor's name and mailing address**

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Basis for the claim: _____

Date or dates debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

$_____

3.3 **Nonpriority creditor's name and mailing address**

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Basis for the claim: _____

Date or dates debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

$_____

3.4 **Nonpriority creditor's name and mailing address**

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Basis for the claim: _____

Date or dates debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

$_____

3.5 **Nonpriority creditor's name and mailing address**

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Basis for the claim: _____

Date or dates debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

$_____

3.6 **Nonpriority creditor's name and mailing address**

_____

_____

_____

As of the petition filing date, the claim is:
Check all that apply.
❑ Contingent
❑ Unliquidated
❑ Disputed

Basis for the claim: _____

Date or dates debt was incurred _____

Last 4 digits of account number ___ ___ ___ ___

Is the claim subject to offset?
❑ No
❑ Yes

$_____

| **Part 4:** | **Total Amounts of the Priority and Nonpriority Unsecured Claims** |

5. Add the amounts of priority and nonpriority unsecured claims.

			Total of claim amounts
5a. **Total claims from Part 1**	5a.		$ 150,000.00
5b. **Total claims from Part 2**	5b.	**+**	$ 24,700
5c. **Total of Parts 1 and 2** Lines 5a + 5b = 5c.	5c.		$174,700